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Bib Data Sheet

CONFIRMATION NO. 5491

SERIAL NUMBER 10/757,769	FILING DATE 01/14/2004 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 040090-000210US
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/440,662 01/15/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/21/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 9	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>[Initials]</i>		
Verified and Acknowledged				

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TWO EMBARCADERO CENTER

EIGHTH FLOOR

SAN FRANCISCO , CA

94111-3834

TITLE

Cryotherapy system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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